

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/701,883
	Filing Date	November 5, 2003
	First Named Inventor	Muhanna, Nabil L.
	Art Unit	
	Examiner Name	
	Attorney Docket Number	49272.830034.1152

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR 70818

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

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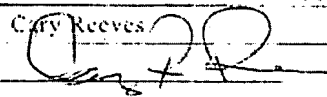
I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73 (b) enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name Cary Reeves

Signature 

Date 10-23-07 Telephone 303-443-7500

NOTE: Signatures of all co-inventors or assignors of record of the entire interest of their representative(s) are required. Submit multiple form if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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